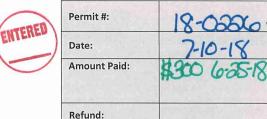
SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT **BAYFIELD COUNTY, WISCONSIN** 

wheld Co. Zoning D





Lot Size

Acreage

6.66

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

Township 45

0

N, Range

☐ SANITARY ☐ PRIVY ☐ CONDITIONAL USE ☐ SPECIAL USE TYPE OF PERMIT REQUESTED → ☐ LAND USE ☐ B.O.A. City/State/Zip: LONE ROCK, W | 53556 Mailing Address: LAVDON Owner's Name: THOMAS CHRIS 608-583-288 Cell Phone: DRUMMOND BURGESON RD Contractor Phone: Contractor: Authorized Agent: (Person Signing Application on behalf of Owner(s)) Agent Phone: Agent Mailing Address (include City/State/Zip): Written Authorization Attached 0 ☐ Yes ☐ No Recorded Document: (i.e. Property Ownership)

2016 R 565685 Tax ID# 35695 PROJECT **Legal Description**: (Use Tax Statement) LOCATION Gov't Lot Lot(s) CSM Vol & Page Lot(s) No. Block(s) No. Subdivision: NE 1/4, NE Section 25

TOWN OF: DRUMMOND

	Creek or Landward side of		yescontinue —		feet	Is Property in Floodplain Zone?	Are Wetlands Present?
☐ Shoreland —	☐ Is Property/Land withi		nd or Flowage yescontinue —	Distance Stru	□ Yes ≫(No	ĭ¥Yes ₩€No	
Non-Shoreland     No			¥	(X—91/1			
Value at Time of Completion * include donated time & material	Project	# of Stories	Foundation	# of bedrooms in structure	What Ty Sewer/Sanita Is on the pr	ry System	Type of Water on property
	X New Construction	☐ 1-Story	☐ Basement	<b>¾</b> 1	☐ Municipal/City		☐ City
¢ • • • • • • •	☐ Addition/Alteration	X 1-Story + Loft	<b>*</b> Foundation	□ 2	☐ (New) Sanitary Spec	cify Type:	□ Well
\$ 30,000	☐ Conversion	☐ 2-Story		□ 3	☐ Sanitary (Exists) Spe	cify Type:	_ 🗶
	☐ Relocate (existing bldg)				☐ Privy (Pit) or	i) NONE	
	☐ Run a Business on		Use	□ None	☐ Portable (w/service co	ontract)	
	Property						
					□ None		
F ' 11' C' 1	10 10 10 10 10 10 10 10 10 10 10 10 10 1		L II		tart tot		
Existing Structur	e: (if permit being applied for	or is relevant to it)	Length:		Width:	Height:	

Proposed Construction:		Length: 0, or Midth: 10	Height:	16-10
Proposed Use	1	Proposed Structure	Dimensions	Square Footage
	<b>Y</b>	Principal Structure (first structure on property)	( X )	
-		Residence (i.e. cabin, hunting shack, etc.)	(18 x 22)	396
V.	~	with Loft	(18 x 70)	780
A Residential Use	/	with a Porch	(8 x 22)	176
*		with (2 <sup>nd</sup> ) Porch	( X )	
		with a Deck	( X )	
*		with (2 <sup>nd</sup> ) Deck	( X )	×
☐ Commercial Use		with Attached Garage	( X · )	
		<b>Bunkhouse</b> w/ ( $\square$ sanitary, or $\square$ sleeping quarters, or $\square$ cooking & food prep facilities)	( X )	
		Mobile Home (manufactured date)	( X )	
□ Na!.:		Addition/Alteration (specify)	( X )	
		Accessory Building (specify)	( X )	
		Accessory Building Addition/Alteration (specify)	( X )	
		Special Use: (explain)	( X )	
		Conditional Use: (explain)	( X )	
		Other: (explain)	( X )	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by **Bayfield County** in determining whether to issue a permit. I (we) further accept liability which may be a result of **Bayfield County** relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described

owner(s):  Owner(s):	Date	4/21/18	
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)			
Authorized Agent	Data		

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit

Attach Copy of Tax Statement

ox below: Draw or Sketch your Property (regardless of what you are applying for) (1) Show Location of: **Proposed Construction** (2) Show / Indicate: North (N) on Plot Plan Show Location of (\*): (3)(\*) **Driveway** and (\*) **Frontage Road** (Name Frontage Road) Show: (4)All Existing Structures on your Property (5)Show: (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P) (6)Show any (\*): (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond (7)Show any (\*): (\*) Wetlands; or (\*) Slopes over 20% BURGSON RD Please complete (1) - (7) above (prior to continuing) Changes in plans must be approved by the Planning & Zoning Dept. (8) Setbacks: (measured to the closest point)

Description	Measurem	ent		Description	Measurement
Setback from the Centerline of Platted Road	>700	Feet		Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way		Feet		Setback from the River, Stream, Creek	Feet
				Setback from the Bank or Bluff	Feet
Setback from the <b>North</b> Lot Line	100	Feet			
Setback from the <b>South</b> Lot Line	480	Feet		Setback from <b>Wetland</b>	100 + Feet
Setback from the West Lot Line	170	Feet		20% Slope Area on the property	☐ Yes ☐ No
Setback from the <b>East</b> Lot Line	250	Feet		Elevation of <b>Floodplain</b>	Feet
Setback to Septic Tank or Holding Tank		Feet		Setback to Well	Feet
Setback to <b>Drain Field</b>		Feet			
Setback to Privy (Portable, Composting)	30	Feet			
	t of the minimum require	al sastenati a	to be		

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: <u>ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.</u> The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number: 17-0100	# of bedrooms:	Sanitary Date: 5/4/17			
Permit Denied (Date):	Reason for Denial:					
Permit #: 18-0386	Permit Date: 7-10-18					
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming    Yes (Deed of Record   Yes (Fused/Contigue)   Yes (Fused/Contigue)   Yes (Deed of Record   Yes (Deed of Record)   Yes (Deed of Record)	ous Lot(s)) No Mitigation	Required Yes No Attached Yes No	Affidavit Required ☐ Yes ☑ No Affidavit Attached ☐ Yes ☑ No			
Granted by Variance (B.O.A.)  ☐ Yes ✓ No Case #:	Previously  ☐ Yes	Granted by Variance (B.O.A.) No Case	±#:			
Was Parcel Legally Created Was Proposed Building Site Delineated ✓Yes □ No	Were P	roperty Lines Represented by Owner Was Property Surveyed	☐ Yes			
Inspection Record: 9TAKEA - Privy exists	? - No Hao lands		Zoning District (F-/ )			
	A 1		Lakes Classification ( — )			
Date of Inspection: 6/17/16	Inspected by:	Date of Re-Inspection:				
Condition(s): Town, Committee or Board Conditions Attac	hed?	d to be attached.)				
Signature of Inspector:	Condition: No buildi for human habitation / slewithout necessary county and to pressurized water shall entuness approved connection to meet and maintain setbacks.	eping purposes JDC permits. No er the building	Date of Approval:			
Hold For Sanitary:  Hold For TBA:	Hold For Affidavit:	Hold For Fees:	_ 0			

City, Village, State or Federal May Also Be Required

SANITARY - 17-0100 SIGN -SPECIAL - Class A CONDITIONAL -BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

18-0226 No. Issued To: **Christopher & Michelle Thomas** Par in Location: NE Drummond  $\frac{1}{4}$  of **NE** Section 45 Range 7 Town of 25 Township W. CSM# Gov't Lot Block Subdivision Lot

For: Residential Use: [ 1.5- Story; Residence (18' x 22') = 396 sq. ft.; Loft (18' x 10') = 180 sq. ft.;

**Porch** (8' x 22') = 176 sq. ft. ] Total Overall = 572 sq. ft.

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): No building shall be used for human habitation / sleeping purposes without necessary County and UDC permits. No pressurized water shall enter the building unless approved connection to POWTS. Must meet and maintain setbacks.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete. This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

**Tracy Pooler** 

Authorized Issuing Official

July 10, 2018

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58

Washburn, WI 54891 (715) 373-6138 APPLICATION FOR PERMIT
BAYFIELD COUNTE WISCONSING

Date Stamp (Received)

JUN 2 1 2018

Bayfield Co. Zoning Dept.

Permit #:	18-0209-
Date:	7-10-18
Amount Paid:	\$355 6-25-18
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICAL

DO NOT START CONSTRU			-			001010101	LICE C CREC	AL LICE T	DO A		HED C
TYPE OF PERMIT RI	EQUESTE	D-	X LAND		PRIVY D	CONDITIONAL City/S			B.O.A.	OT elephone:	(763)
Owner's Name:	/	7	_	iviailin	The A	1		5448		29-	7034
John J	Susa	n t	rance	2 133	19 Ave	VW Coo	n Rapids, 1	11		ا در all Phone:	(763)
Address of Property:				City/S	tate/Zip:	IIT	11022		1		•
10040	Ctv	H	NIV 1	V Da	ummond.	MTD	4832				5959
Contractor:	1	_	1	,		umber:			P	lumber Ph	none:
Brian E	KSI	ran	- 01	0.0	1-5987 Phone: A	rent Mailing Add	ress (include City/St	ate/7ipt	V	Vritten Au	thorization
Authorized Agent: (P	erson Signir	ng Applica	tion on benair					ron Ki	VCC A	Attached	
Mike tu	Tak			(715) 81			Lake Rollin	Pecorded Do		Yes  I e Prope	rty Ownership)
PROJECT	Logal D	occrinti	on: (Use Ta	ex Statement)	23 digits) Tax I			Volume 20	ITR	Page(s	571096
LOCATION	Legal D	escripti			M Vol & Page	5069 Lot(s) No.	Block(s) No.	Subdivision:			/
1/4,		1/4	Gov't		34 7,139	LOU(S) NO.	Biock(s) ivo.	Suburvisioni			
			7	3 11	Town of:			Lot Size		Acreage	<u> </u>
Section 3	, To	wnship	45 N	I, Range <u> </u>	1	10 d				2,0	4
					DYON	mond				, ,,,	
				300 feet of River, Stre		Distance Struc	cture is from Shore		Is Prope		Are Wetlands
'★ Shoreland →					escontinue				loodplain		Present? Yes
A Shoreland	✓ Is Pr	operty/	Land within	1000 feet of Lake, Por		Distance Struc	ture is from Shor	feet	XN		□ No
				lf y	escontinue						
☐ Non-Shoreland											
Value at Time		MINISTER.		SECRETARY OF	THE RELIGIONS						
of Completion		Projec		# of Stories		#		What Type			Water
* include		Projec		and/or basement	Use	of bedrooms		er/Sanitary on the prop			Water
donated time &						Deurooms		on the prop			ing freeze of the
material	× New	Const	ruction	X 1-Story	☐ Seasonal	□ 1	☐ Municipal/0				☐ City
6 2 il	☐ Add	ition/A	Iteration	☐ 1-Story + Loft	🗡 Year Round	□ 2	☐ (New) Sanit				□ Well
\$24,000	☐ Con	version		☐ 2-Story		□ 3	☐ Sanitary (Ex			200 !!	None
			kisting bldg)	Basement		S Name	☐ Privy (Pit) ☐ Portable (w.			200 gallo	n) ( 30110
-			ness on	☐ No Basement ☐ Foundation		None	☐ Portable (w.		iactj		
V	Prop	erty		☐ Foundation		1					
				П			XNone				
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	e: (if per	<b>√</b>		or is relevant to it)	Proposed Structu	21	Width:		Hei	ght:	Square Footage
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Proposed Constr  Proposed Use  Residential  Commercial  I (we) declare that it am (are) responsible may be a result of above described procupation of the commercial of the commercial above described procupation of the commercial	Use	in (including reasonable reasonable)	Principal Residence Bunkhou Mobile H Addition Accessor Accessor Conditio Other: (c	Structure (first structe (i.e. cabin, hunting with Loft with a Porch with (2 <sup>nd</sup> ) Porch with a Deck with Attached Gause w/ (□ sanitary, or Home (manufactured cap Malteration (specify ry Building Addition, specify ry	Proposed Structure on property) shack, etc.)  arage sleeping quarters date)  // Alteration (specify amined by me (us) and to ting and that it will be relied in or with this application.	WITHOUT A PERN le best of my (our) Loon by Bayfield Could I (we) consent to co	Width: Width: Width: 46  Afficiency of the second of the s	Diu  ( 40  ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	Heimension  X 4  X X  X  X  X  X  X  X  X  X  Complete. I mit. I (we) county ordinate  Copy of	ght:  O)  O)  O)  O)  O)  O)  O)  O)  O)  O	Square Footage 1,600 240

ox below: Draw or Sketch your Property (regardless of what you are applying for) (1) Show Location of: **Proposed Construction** (2) Show / Indicate: North (N) on Plot Plan (3) Show Location of (\*): (\*) Driveway and (\*) Frontage Road (Name Frontage Road) (4)Show: All Existing Structures on your Property Show: (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P) (6) Show any (\*): (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond (7) Show any (\*): (\*) Wetlands; or (\*) Slopes over 20% See attachment Please complete (1) - (7) above (prior to continuing) Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Pescription	Measuremen	nt		Description	Measuren	nent
Co Hwy N						
Setback from the Centerline of Platted Road	166+	Feet		Setback from the Lake (ordinary high-water mark)	150	Feet
Setback from the Established Right-of-Way	130+	Feet		Setback from the River, Stream, Creek	NA	Feet
				Setback from the Bank or Bluff	NA	Feet
Setback from the <b>North</b> Lot Line	15	Feet				,
Setback from the <b>South</b> Lot Line ( ) Hwy N	NA	Feet		Setback from Wetland	120+	Feet
Setback from the West Lot Line	NA	Feet	1-14	20% Slope Area on property	Yes	<b>⊠</b> ′No
Setback from the East Lot Line Fasement Raci	160+	Feet		Elevation of Floodplain	NA	Feet
	1					de i
Setback to Septic Tank or Holding Tank	NH	Feet	- 7-	Setback to Well	NA	Feet
Setback to <b>Drain Field</b>	NA	Feet	1 1			
Setback to Privy (Portable, Composting)	NA	Feet				

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be narked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:	1 2 At 1	# of bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:			
Permit #: 18-0009	Permit Date: 7-10	)-18		
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming  □ Yes (Deed of Record □ Yes (Fused/Contigu	ous Lot(s)) 🗹 No	Mitigation Required Mitigation Attached	Yes No	Affidavit Required Affidavit Attached
Granted by Variance (B.O.A.)  Ves No Case #:		Previously Granted by ☐ Yes ☑ No	/ Variance (B.O.A.)	e #:
Was Parcel Legally Created Was Proposed Building Site Delineated Wes Do		Were Property Line	es Represented by Owner Was Property Surveyed	Yes
Inspection Record: Of Mer	liker. on site	10		Zoning District ( R=1 ) Lakes Classification ( 8 )
Date of Inspection: 7/3//6	Inspected by:	ele		Date of Re-Inspection:
Condition(s):Town, Committee or Board Conditions Attack  Signature of Inspector:	Condition: No ac habitation / sleep and UDC permits	cessory building shall be ping purposes without n . No pressurized water proved connection to PO	used for human necessary county	Date of Approval: 76/14
Hold For Sanitary:	Hold For Affida	avit: 🔲   F	Hold For Fees:	

Ph: 763-786-3313 BLAINE, MN 55449-4674 10251 BALTIMORE STREET NE Store: BLAINE Date: Jun 1, 2018 11:25:43 AM

Design #: 318856348200

Estimate #: 27168

Estimated price: \$12,441.47 \*

\*Today's estimated price, future pricing may go up or down. Tax, labor,

snd delivery not included. And purchase a saved

design at home

- 1. Go to Menards.com.
- Go to Saved Designs under the Welcome Login menu. Log into your account.
- 5. Add your building to the cart and purchase. Select the saved design to load back into the estimator.

MANUFACTURING

How to purchase at the store

- into System V to print SOC's. 1. Have a building materials team member enter the estimate number

2. Take the SOC to the register and pay.

2-8 du. BULLBING 2.101/5.. . V/E 6 .L 2, 10 1/5... A-S 3,× 6. I. .9 T .9 T 2.101.5 Z/TOT.S 16'x9' 011 .91 **BUILDING 1** .91 5 .81 2,101/5... 2. TO T\5.. ,9T A-I . Z/T T Z/T T MAJA ROOF PLAN

city, Village, State or Federal May Also Be Required

AND USE - X SANITARY - None SIGN -SPECIAL -CONDITIONAL -BOA -

## **BAYFIELD COUNTY** PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	18-0229 Issued To: John & Susan France / Mike Furtak, Agent														
Location:	-	1/4	of	-	1/4	Section	34	Township	45	N.	Range	8	W.	Town of	Drummond
Gov't Lot				Lot	3	Blo	ck	Su	bdivisi	on				CSM# '	1134

For: Residential Principal Structure: [ 1- Story; Pole Building (40' x 40') Lean-to (6' x 40') = 1,840 sq. ft. ] (Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): No accessory building shall be used for human habitation / sleeping purposes without necessary County and UDC permits. No pressurized water shall enter the building unless approved connection to POWTS. Must meet and maintain setbacks.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

> Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

### **Tracy Pooler**

Authorized Issuing Official

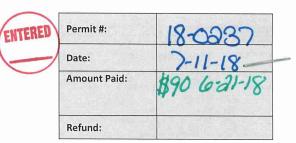
July 10, 2018

Date

#### SUPPLIES APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

#### **APPLICATION FOR PERMIT** BAYFIELD COUNTY, WISCONSIN





INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department

Bayfield Co. Zoning Dept.

DO NOT START CORS	TRUCTION UNTIL	ALL PERIVITIS F	HAVE BEEN ISSUED	TO APPL	LICANT.		FILL OU	T IN INK	(NO PEN	CIL)	
TYPE OF PERMIT R	REQUESTED	☐ LANI	D USE SAN	NITARY	PRIVY	CONDITIONA	L USE   SPECIAL	USE	☐ B.O.A	. 🗆 0	OTHER
Owner's Name:				Mailir	ng Address:	City	/State/Zip:			Γelephon	e:
Took + ka	th leen	(and/	100	122	w Bou Lol	VIT U	both burn. U	52	189)	215-	373-2628
Address of Property:	1 to le con		2 10	City/S	State/Zip:	21 00	20119401050		(	Cell Phon	
49570 N	arrows R			Ori	unword l	e,			2	15-2	09-178
Contractor:				Contr	actor Phone: P	Plumber: //				Plumber	P/hone:
Randy K	erguer	1		715-	292-4819	NI	7			N	A
Authorized Agent: (F	Person Signing Appli	cation on behal	lf of Owner(s))	Agent	t Phone:	Agent Mailing Ad	dress (include City/State	/Zip):			Authorization
N	I A				1111	774				Attached □ Yes	□ No
PROJECT	Legal Descrip	tion: /Uso T	av Statement)	Tax ID				Recor	ded Docum	ent: (Sho	wing Ownership)
LOCATION	Legal Descrip	tion. (ose i	ax statement)	01	18-4162-	03 000	7	432	-24	_ 3	35-35
1/4.	1/4	Gov't Lot	Lot(s)	CSM	Vol & Page CSN		s) No. Block(s) No.	Subdi	vision:	otoc	Alus
		1401			535-355	ن ا	5	C	other	LAN	w
Section 15	, Township	44 N.R	ange 7 w	v l	Town of: 2 Yuwu	aul		Lot Siz	ze	Acrea	•
					2142000	CUNU)				N.	y acres
	☐ Is Property	//Land withi	n 300 feet of Rive	er, Stre	am (incl. Intermittent)	Distance Stru	cture is from Shorelin	e:	Is Prope	ustra Inc	Are Wetlands
☐ Shoreland →		dward side o	of Floodplain?	If y	escontinue			feet	Floodplair		Present?
i Shoreland	Is Property	//Land withi	n 1000 feet of Lal				cture is from Shorelin	e:	□ Ye		☐ Yes
The Park				If ye	escontinue>		<u> </u>	feet	<b>⊸</b> N	0	No
☐ Non-Shoreland											
Value at Time											
of Completion						# of	Wh	at Typ	e of		Type of
* include	Proje	ct	# of Storie	es	Foundation	bedrooms			y System		Water
donated time &						structure	Is on t	he pro	perty?		property
material	☐ New Cons	truction	4 1-Story		☐ Basement		☐ Municipal/City				
	Addition/		☐ 1-Story + I	Loft	Foundation	□ 2	☐ (New) Sanitary	Specif	v Type:		☐ City
\$30,000	☐ Conversion		☐ 2-Story	2010		□.3/	Sanitary (Exists			hou w	
30,000	☐ Relocate (€				-	XH	☐ Privy (Pit) or				
	☐ Run a Busi				Use	None	☐ Portable (w/serv				
	Property				Year Round		☐ Compost Toilet				
=							None				
							□ None				
Existing Structure	e: (if permit bei	ng applied fo	or is relevant to it	-)	Length: 17/	2	_ reduc		Hois	tht. 2	-5 FM 1
Existing Structure Proposed Constru		ng applied fo	or is relevant to it	t)	Length: 70	0,	Width: 34				STURY
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	uction:	ng applied fo	or is relevant to it		0	6	Width: 34	Di		ght: /	Square
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Proposed Constru	uction:	Principal	<b>Structure</b> (first	t struc	Proposed Structurum on property)	6	Width: 34	Di (	Heig	ght: /	Square
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Proposed Us	e ✓	Principal	Structure (first e (i.e. cabin, hu with Loft with a Porch with (2 <sup>nd</sup> ) Po with a Deck	t struct	Proposed Structurum on property)	6	Width: 34	Di ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	Mensions X X X X X X	ght: /	Square
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Proposed Constru	Use  Use  Use  pplication (including a detail and accuracy or yrelying on this infor	Principal Residenc  Bunkhou Mobile H Addition, Accessor  Special U Conditior Other: (ex	Structure (first e (i.e. cabin, hu with Loft with a Porch with (2nd) Po with a Deck with (2nd) Do with Attache se w/ ( sanitar ome (manufactu /Alteration (sp y Building (sp y Building Addi se: (explain)	t structuring s  h orch eck ed Gar ry, or [ ured da pecify) becify) ition/A  or STAR an examining and the with this a	rage sleeping quarters, te) Alteration (specify)  TING CONSTRUCTION V ed by me (us) and to the be at it will be relied upon by I pplication. I (we) consent t	or Cooking &	Width: 34 Width: 2)  A food prep facilities)  TWILL RESULT IN PENALTI edge and belief it is true, corre teermining whether to issue a p	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	Heighten Signature Signatu	ght:  ) ) ) ) ) ) ) ) ) ) ) ) ) ) acknowledgeept liability.ess to the	Square Footage  Square Footage
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Proposed Construction  Proposed Us  Residential  Residential  I (we) declare that this at (are) responsible for the result of Bayfield County property at any reasonal Owner(s):  (If there are Multi-Authorized Agent:	Use  Use  Use  pplication (including a detail and accuracy of y relying on this information of the purpose of t	Principal Residenc  Bunkhou Mobile H Addition, Accessor Accessor  Special U Conditior Other: (example of all information 1 (we) ample of a light of the control of the cont	Structure (first e (i.e. cabin, hu with Loft with a Porch with (2 <sup>nd</sup> ) Powith a Deck with (2 <sup>nd</sup> ) Dowith Attaches e w/ ( sanitar ome (manufactu/Alteration (spy Building Addi se: (explain)	t struct unting s  h orch eck ed Gar ry, or ured da pecify) pecify) ition/A  or STAR en examining and the with this a	rage sleeping quarters, te) Alteration (specify)  TING CONSTRUCTION V ed by me (us) and to the be at it will be relied upon by I pplication. I (we) consent t	or cooking &	Width: 34 Width: 2 Width: 34 Width: 2 Width: 2 Width: 34 Width: 2 Width: 34	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	Height imensions  X  X  X  X  X  X  X  X  X  X  X  X  X	ght:  ) ) ) ) ) ) ) ) ) ) ) ) ) acknowledget liability cess to the	Square Footage  Square Footage

Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measureme	nt		Description	Measurement
	. /				
Setback from the Centerline of Platted Road	7 14 mi	Feet		Setback from the Lake (ordinary high-water mark)	PO Feet
Setback from the Established Right-of-Way	+ 001 Y	Feet		Setback from the River, Stream, Creek	A2/A Feet
				Setback from the Bank or Bluff	1/1/A- Feet
Setback from the <b>North</b> Lot Line	40+	Feet			10/17 reet
Setback from the <b>South</b> Lot Line	100+	Feet		Setback from Wetland	N/A Feet
Setback from the <b>West</b> Lot Line	100 t	Feet		20% Slope Area on the property	
Setback from the <b>East</b> Lot Line	PO	Feet		Elevation of Floodplain	Yes No
			TI.		70/31 FEEL
Setback to Septic Tank or Holding Tank	26	Feet		Setback to Well (From addition)	+ 60 Feet
Setback to <b>Drain Field</b>	2007	Feet		Croyor aggreciae	5 60 Feet
Setback to <b>Privy</b> (Portable, Composting)	NA	Feet		•	
Prior to the placement or construction of a structure within ten (10) feet o	f the minimum required	setback, t	he bo	undary line from which the setback must be measured must be visible from or	

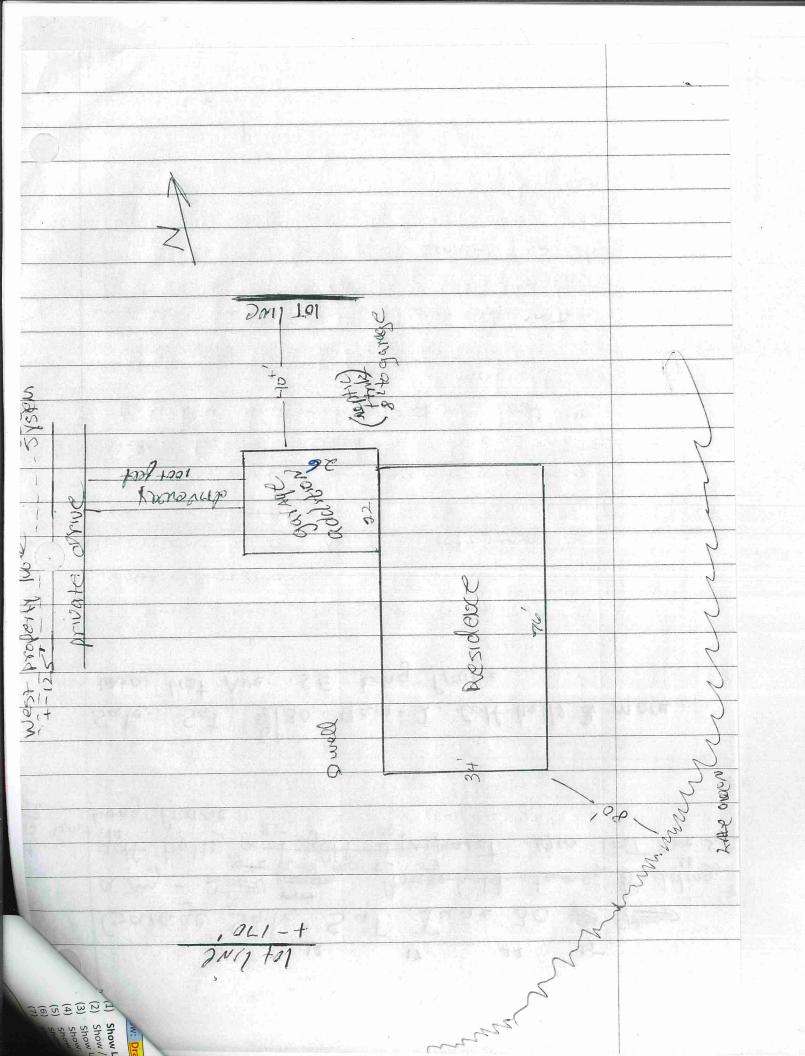
ner previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:	1351	# of bedrooms:	Sanitary Date:	
Permit Denied (Date):	Reason for Denial:			/0-4)-/~	
Permit #: 18-0-837	Permit Date: 7-11-18				
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming    Yes (Deed of Record   Yes (Fused/Contigue)   Yes   Yes   Yes	ous Lot(s))	Mitigation Required Mitigation Attached	☐ Yes ☑ No ☐ Yes ☑ No		No No
Granted by Variance (B.O.A.)  ☐ Yes ☐ No Case #:	Previously Granted by Variance (B.O.A.)  ☐ Yes ☐ No Case #:				
Was Parcel Legally Created Was Proposed Building Site Delineated  ✓ Yes □ No	Were Property Lines Represented by Owner Was Property Surveyed			□ No	
Inspection Record: Flagge				Zoning District (R-1)	
				Lakes Classification ( )	)
Date of Inspection: 6/26/18			Date of Re-Inspection:		
Condition(s): Town, Committee or Board Conditions Attached?					
Condition: A UDC permit from the locally contracted UDC inspection agency must be obtained prior to the start of construction if required. Must meet and maintain setbacks.				Date of Approval: 7/10/1	100
Hold For Sanitary:  Hold For TBA:	Hold For Affic	lavit: 🗌	Hold For Fees:		_



Village, State or Federal May Also Be Required

AND USE - X SANITARY - 1357 (10/25/1972) SIGN -SPECIAL -CONDITIONAL -BOA -

## **BAYFIELD COUNTY** PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

Jack & Kathleen Carlson Issued To: 18-0237 No. Drummond Town of W. Range 7 N. 44 Township 15 Section Location: 1/4 of -Subdivision Owenwood CSM# Block 5 1 & 11 Lot Gov't Lot

For: Residential Addition / Alteration: [ 1- Story; Attached Garage (26' x 22') = 572 sq. ft. ]

(Disclaimer): Any future expansions or development would require additional permitting

Condition(s): A UDC permit from the locally contracted UDC inspection agency must be obtained prior to the start of construction. Must meet and maintain setbacks.

This permit expires one year from date of issuance if the authorized construction NOTE: work or land use has not begun.

> Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

**Tracy Pooler** 

Authorized Issuing Official

July 11, 2018

Date